								1	Applica	on or	Dockei Mu	mber		
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003									PD 10767761					
CLAIMS AS FILED - PART I (Column 1) (Column 2)							•	SMALL ENTITY TYPE			OTHER THAN			
T	OTAL CLAIMS	3	3	4				RATE	fĒ	E	RATE	FEE		
F	OR		NUMBER FILED		NUM	BER EXTRA	ľ	BASIC F	EE 385.	00 Oi	BASIC FEE	770.00		
Ţ	OTAL CHARGE	ABLE CLAIMS	34 minus 20=		•	14		XS 9=		OF	XS18=			
IN	DEPENDENT C	CLAIMS .	4 minus 3 =		•	Ĺ	ľ	X43=		OF	X86=			
MULTIPLE DEPENDENT CLAIM PRESENT								-145=		7				
• If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	-	OF OF	`			
•									·		OTHER	THAN		
•	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						•	SMAL	LENTIT	Y OF				
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADD TION FEE	AL	RATE	ADDI- TIONAL FEE		
	Total	.34	Minus			=14		XS 9=		OF	XS18=			
MEA	Independent	· U	Minus			= /		X43=	1.	OF	X86=			
L	FIRST PRESE	ENTATION OF M	ULTIPLE DE	PENDENT	CLAIM			+145=		OR	+290=	·		
				•				TOTA ODIT. FE	300	DOR	TOTAL ADDIT. FEE	770.00		
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	ST ER USLY	PRESENT EXTRA		RATE	ADD TION	B	RATE	ADDI- TIONAL FEE		
	Total	. 34	Minus	-3	4			XS 9=	T	OR	X\$18=			
	Independent	NTATION OF ML	Minus	 4	/ /		l	X43≖		OR	X86=			
	FIRST PRESE	NIATION OF ME	CTIPLE DE	PERDENT	CLAIN			+145=		OR	+290=			
	-					•	_	TOTAL DDIT. FEE		OR	TOTAL ADDIT FEE			
		(Column 1)		. (Colum	n 2)	(Column 3)	. ^		-	_				
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID FI	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONA FEE		RATE	ADDI- TIONAL FEE		
2	Total	•	Minus	•		±	Γ	X\$ 9=		OR	X\$18=			
3	Independent	•	Minus	oès .		•	H	X43=	 	1	X86=			
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						\vdash	A70=		-IOR	<u> </u>			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											+290=			
	l the "Highest Nur f the "Highest Nur	nner Previously Pa mber Previously Pa mber Previously Paid ber Previously Paid	id For IN THIS	S SPACE IS I	ess than less than	20, enter "20." 3, enter "3."		TOTAL DOIT. FEE d in the ap	propriate l		TOTAL ADDIT, FEE burnn 1.			